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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application No.	10/695,174
		Filing Date	October 27, 2003
		First Named Inventor	Hong Soon Nam
		Art Unit	2616
		Examiner Name	Phuc H. Tran
Total Number of Pages in This Submission	12	Attorney Docket Number	5895P043

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Reply  <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> PTO/SB/08  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div>postcard</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Eric S. Hyman, Reg. No. 30,139 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	12/18/07

CERTIFICATE OF MAILING/TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
Typed or printed name	Linda Metz
Signature	
Date	12/18/07



# FREE TRANSMITTAL for FY 2007

Patent fees are subject to annual revision.

## Complete if Known

Application Number	10/695,174
Filing Date	October 27, 2003
First Named Inventor	Hong Soon Nam
Examiner Name	Phuc H. Tran
Art Unit	2616
Attorney Docket No.	5895P043

☒ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 0.00

## METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_
- ☒ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☒ Credit any overpayments
- ☐ Charge fee(s) indicated below, except for the filing fee ☒ Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.
- ☒ Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.

## FEE CALCULATION

### 1. EXTRA CLAIM FEES

	Extra Claims	Fee from below	Fee Paid
Total Claims	20	25	0
Independent Claims	3	4	0
Multiple Dependent			

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	210	2201	105	Independent claims in excess of 3
1203	370	2203	185	Multiple Dependent claim, if not paid
1204	810	2204	405	**Reissue independent claims over original patent
1205	810	2205	405	**Reissue claims in excess of 20 and over original patent

\*\*for number previously paid, if greater, For Reissues, see below

SUBTOTAL (1)

(\$) 0.00

### 2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Code	Fee (\$)	Fee Description
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.
2053	130	2053	130	Non-English specification
1251	120	2251	60	Extension for reply within first month
1252	480	2252	230	Extension for reply within second month
1253	1,050	2253	525	Extension for reply within third month
1254	1,640	2254	820	Extension for reply within fourth month
1255	2,230	2255	1,115	Extension for reply within fifth month
1401	510	2401	255	Notice of Appeal
1402	510	2402	255	Filing a brief in support of an appeal
1403	1,030	2403	515	Request for oral hearing
1451	1,510	2451	1,510	Petition to institute a public use proceeding
1460	130	2460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1806	180	1806	180	Submission of Information Disclosure Stmt
1809	810	1809	405	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	810	2810	405	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify) \_\_\_\_\_

SUBTOTAL (2)

(\$)

Fee Paid

## SUBMITTED BY

Name (Print/Type) Eric S. Hyman

Signature

Registration No.  
(Attorney/Agent)

30,139

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(310) 207-3800

Date

12/18/07



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: )  
 )  
Hong Soon Nam et al., ) Examiner: Tran, Phuc H  
 )  
Application No. 10/695,174 ) Art Unit: 2616  
 )  
Filing Date: 10/27/2003 ) Confirmation No. 7122  
 )  
For: RESOURCE ALLOCATION METHOD )  
FOR PROVIDING LOAD BALANCING )  
AND FAIRNESS FOR DUAL RING )  
 )

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**AMENDMENT AND RESPONSE TO OFFICE ACTION**

Mail Stop: Amendments  
Commissioner for Patents  
P.O. Box 1450  
Arlington, VA 22313-1450

Dear Sir:

In response to the outstanding Office Action mailed September 19, 2007, please amend the above-identified application as follows: